

Understanding Monoclonal Antibodies for CI/CT Staff

Last Update: 9/22/21

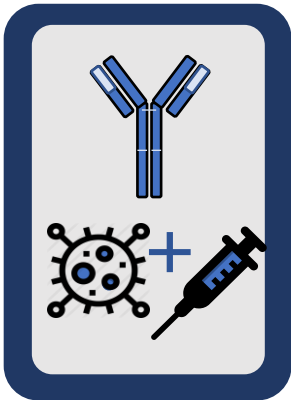


NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

As a contact tracer or case investigator, you may receive questions from case-patients, contacts, or loved ones in your community regarding the latest COVID-19 developments, including the use of monoclonal antibodies for the treatment of COVID-19. **This document will provide you with basic facts that you can share with others.**

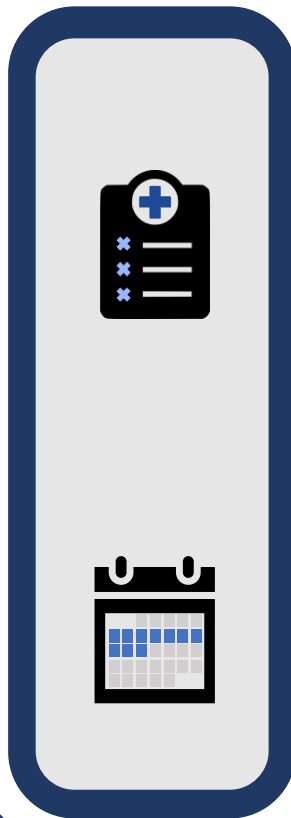
This information is provided for your reference only to help you respond to questions raised by others. You should not provide medical advice or recommend any course of treatment.

What are Monoclonal Antibodies? How are they different from the vaccine?



- **Monoclonal antibodies**, or mAbs, are **lab-produced molecules designed to fight a particular infection** (in this case, the virus that causes COVID-19). They are given to patients directly with an infusion or a shot, and they may help patients who are at high risk for severe symptoms or hospitalization.
- mAbs have received an Emergency Use Authorization (EUA) as a treatment option for mild to moderate COVID-19 in certain high-risk patients. **They do not replace vaccines**, which protect from COVID-19 by triggering the body's natural immune response and provide the best protection against severe disease, hospitalization, and death.

Who is eligible for monoclonal antibody treatment and when?



WHO

- **High risk adults and youth (age 12 and older who weight at least 88lbs) may be eligible for treatment. High risk factors include:**
 - Older age (>65)
 - Obesity or being overweight
 - Pregnancy
 - Chronic kidney disease
 - Cerebral palsy or other developmental conditions
 - Other non-medical factors such as race or ethnicity may also put individuals at higher risk for severe COVID-19
 - A weakened immune system
 - Heart disease including high blood pressure
 - Lung disease such as COPD, asthma, or cystic fibrosis
 - Sickle cell disease
 - Regular use of a feeding tube or ventilator
 - Diabetes

WHEN

- **mAbs must be administered:**
 - **As soon as possible after a positive COVID-19 test result and**
 - **Within 10 days of a person's first COVID-19 symptoms.**

People who are not fully vaccinated or have immunocompromising conditions and have either been exposed to COVID-19 or are at high risk of exposure may qualify for [preventive treatment](#), which also does not replace a vaccine.

Note that this treatment is not a substitute for a vaccination against COVID-19.

Visit [MySpot.nc.gov](https://www.myspot.nc.gov) to schedule a vaccine near you.

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How can an individual find mAb treatment?



If a contact or a case patient expresses interest in monoclonal antibody treatment, direct them to **speak to their healthcare provider**, or direct them to one of the **resources below**:

- **There are three ways to find monoclonal antibody (mAbs) treatment near you:**
 1. Call the Combat COVID Monoclonal Antibodies Call Center at 1-877-332-6585 (English) or 1-877-366-0310 (Spanish).
 2. Use the [National Infusion Center Association locator tool](#). NCDHHS does not maintain this tool and it may not include all locations offering mAbs in North Carolina.
 3. Visit covid19.ncdhhs.gov/FindTreatment

Visit <https://covid19.ncdhhs.gov/treatment> for more information about monoclonal antibodies.

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